

PART C FORMS AND EXHIBIT

EXTRACT

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**FORM A
TRANSMITTAL LETTER**

SHERMAN MINTON CORRIDOR PROJECT

PROPOSER: _____

SOQ Date: January 7, 2020

Indiana Finance Authority
Attn: Silvia Perez
One North Capitol Avenue, Suite 900
Indianapolis, Indiana 46204
Telephone: (317) 234-7701
Email: SMCPDBBV@indot.in.gov

The undersigned ("Proposer") submits this Statement of Qualifications (this "SOQ") in response to the Request for Qualifications dated October 25, 2019 (as amended, the "RFQ"), issued by the Indiana Finance Authority (IFA) to design and construct the Project. Initially capitalized terms not otherwise defined herein shall have the meanings set forth in the RFQ.

Enclosed, and by this reference incorporated herein and made a part of this SOQ, are the following:

Volume 1

- Transmittal Letter (this **Form A**);
- Executive Summary;
- Confidential Contents Index;
- Proposer and Team Structure and Experience (including **Form B-1**);
- Approach to Project;
- **Forms B-2 and C**;
- INDOT and KYTC Certificates of Qualification or Letter Regarding Application for Certificate;
- **Form D**;
- **Form E**; and
- **Form F**.

Volume 2

- Financial Materials

Proposer acknowledges access to all materials posted on the Procurement Website and the following addenda and sets of questions and answers to the RFQ:

Addendum # ___ issued on

Q&A Matrix #___ issued on

[Proposer to list any other addenda to this RFQ and sets of questions and answers by dates and numbers prior to executing Form A]

Proposer represents and warrants that it has fully read the RFQ and agrees to abide by the contents and terms of the RFQ and the SOQ.

Proposer understands that IFA is not bound to shortlist any Proposer and may, in its sole discretion, reject any SOQ that IFA may receive.

Proposer further understands that all costs and expenses incurred by it in preparing this SOQ and participating in the Project procurement process will be borne solely by Proposer, except, to the extent of any payment offered by IFA for work product, as described in Part A, Section 5.3 of the RFQ.

Proposer agrees that the Project Sponsors will not be responsible or liable for any errors, omissions, inaccuracies or incomplete statements in the RFQ.

Proposer acknowledges and agrees to the protest provisions and understands that it limits Proposer's rights and remedies to protest or challenge the RFQ or any determination or shortlisting thereunder.

This SOQ shall be governed by and construed in all respects according to the laws of the State of Indiana, without regard to any conflict of laws principles or provisions.

Proposer's business address:

| | | |
|-------|----------|------------------|
| (No.) | (Street) | (Floor or Suite) |
|-------|----------|------------------|

| | | | |
|--------|---------------------|----------------------|-----------|
| (City) | (State or Province) | (ZIP or Postal Code) | (Country) |
|--------|---------------------|----------------------|-----------|

State or Country of Incorporation/Formation/Organization: _____

[insert appropriate signature block from following pages]

1. Sample signature block for corporation or limited liability company:

[Insert Proposer's name]

By: _____

Print Name: _____

Title: _____

2. Sample signature block for partnership or joint venture:

[Insert Proposer's name]

By: *[Insert general partner's or member's name]*

By: _____

Print Name: _____

Title: _____

[Add signatures of additional general partners or members as appropriate]

3. Sample signature block for attorney in fact:

[Insert Proposer's name]

Print Name: _____

Title: _____

Attorney in Fact

4. Sample signature block for a Proposer not yet formed as a legal entity:

[Insert Proposer name]

By: _____

Print Name: _____

Title: _____

**FORM B-1
PROPOSER TEAM SUMMARY**

| | |
|-------------------------|--|
| PROPOSER | |
| CONTACT PERSON | |
| ADDRESS | |
| TELEPHONE NUMBER | |
| E-MAIL ADDRESS | |

| | |
|---|--|
| EQUITY MEMBER <i>(Duplicate for each Equity Member)</i> | |
| NAME OF FIRM | |
| CONTACT PERSON | |
| ADDRESS | |
| TELEPHONE NUMBER | |
| E-MAIL ADDRESS | |

| | |
|---|--|
| MAJOR PARTICIPANT <i>(Duplicate for each Major Participant)</i> | |
| NAME OF FIRM | |
| CONTACT PERSON | |
| ADDRESS | |
| TELEPHONE NUMBER | |
| E-MAIL ADDRESS | |

| | |
|---|--|
| FINANCIALLY RESPONSIBLE PARTIES (See Part A, Section 2.9) <i>(Duplicate for each</i> Financially Responsible Party) | |
| NAME OF FIRM | |
| CONTACT PERSON | |
| ADDRESS | |
| TELEPHONE NUMBER | |
| E-MAIL ADDRESS | |

FORM B-2
INFORMATION REGARDING
PROPOSER, EQUITY MEMBERS, MAJOR PARTICIPANTS AND FINANCIALLY
RESPONSIBLE PARTIES

** Please do not leave any blank spaces; if not applicable, so state.*

Name of Proposer:

Name of Firm Completing **Form B-2**:

Firm's role on Proposer team (check one):

☐ Proposer; ☐ Equity Member; ☐ Major Participant; ☐ Financially Responsible Party

Year Established: _____

Individual Contact: _____

Individual's Title: _____

Firm's CEO/Chairman: _____

Federal Tax ID No. (if applicable): _____

Telephone No.: _____

North American Industry Classification Code: _____

Fax No.: _____

Name of Official Representative (if applicable): _____

Business Organization (check one):

☐ Corporations (If yes, then indicate the State/Country/Province and Year of Incorporation and complete Sections A-C and the Certification form (**Form C**) for the entity.)

☐ Partnership (If yes, complete Sections A-C and the Certification form (**Form C**) for each member.)

☐ Joint Venture (If yes, complete Sections A-C and the Certification form (**Form C**) for each member.)

☐ Limited Liability Company (If yes, complete Sections A-C and the Certification form (**Form C**) for each member.)

☐ Other (If yes, describe and complete Sections A-C and the Certification form (**Form C**))

A. Business Name: _____

B. Business Address: _____

Headquarters: _____

Office Performing Work: _____

Contact Telephone Number: _____

C. If the entity is a Joint Venture, Partnership or Limited Liability Company, indicate the name and role of each member firm in the space below. Complete a separate Information form (**Form B-2**) for each member firm and attach it to the SOQ. Also indicate the name and role of each Financially Responsible Party and attach a separate form.

| <u>Name of Firm</u> | <u>Role</u> |
|---------------------|-------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am the firm's Official Representative:

By: _____

Print Name: _____

Title: _____

Date: _____

[Please make additional copies of this form as needed for each entity required to complete this form.]

**FORM C
CERTIFICATION**

Proposer: _____

Name of Firm Completing this Form: _____

1. Has the firm or any affiliate,* or any current officer, director or employee of either the firm or any affiliate, been indicted or convicted of bid (i.e., fraud, bribery, collusion, conspiracy, antitrust, etc.) or other contract related crimes or violations or any other felony or serious misdemeanor within the past 10 years (measured from the date of issuance of this RFQ)?

☐ Yes ☐ No

If yes, please explain:

2. Has the firm or any affiliate* ever sought protection under any provision of any bankruptcy act within the past 10 years (measured from the date of issuance of this RFQ)?

☐ Yes ☐ No

If yes, please explain:

3. Has the firm or any affiliate* ever been disqualified, removed, debarred or suspended from performing work for the federal government, any state or local government, or any foreign governmental entity within the past 10 years (measured from the date of issuance of this RFQ)?

☐ Yes ☐ No

If yes, please explain:

4. Has the firm or any affiliate* ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or other material misrepresentation to a public entity within the past 10 years (measured from the date of issuance of this RFQ)?

☐ Yes ☐ No

If yes, as to each such inquiry, state the name of the public agency, the date of the inquiry, the grounds on which the public agency based the inquiry, and the result of the inquiry.

5. Has any construction project performed or managed by the firm or, to the knowledge of the undersigned, any affiliate* involved serious, repeated or multiple failures to comply with safety rules, regulations, or requirements within the past 10 years (measured from the date of issuance of this RFQ)?

☐ Yes ☐ No

If yes, please identify the team members and the projects, provide an explanation of the circumstances, and provide owner contact information including telephone numbers and e-mail addresses.

6. Has the firm or any affiliate* been found, adjudicated or determined by any federal or state court or agency (including, but not limited to, the Equal Employment Opportunity Commission, the Office of Federal Contract Compliance Programs and any applicable Indiana governmental agency) to have violated any laws or Executive Orders relating to employment discrimination or affirmative action within the past 10 years (measured from the date of issuance of this RFQ), including but not limited to Title VII of the Civil Rights Act of 1964, as amended (42 U.S.C. Sections 2000 *et seq.*); the Equal Pay Act (29 U.S.C. Section 206(d)); and any applicable or similar Indiana law?

☐ Yes ☐ No

If yes, please explain:

7. Has the firm or any affiliate* been found, adjudicated, or determined by any state court, state administrative agency, including, but not limited to, the Indiana Department of Labor, federal court or federal agency, to have violated or failed to comply with any law or regulation of the United States or any state within the past 10 years (measured from the date of issuance of this RFQ) governing any of common construction wages, (prevailing wages) (including but not limited to payment for health and welfare, pension, vacation, travel time, subsistence, apprenticeship or other training, or other fringe benefits) or overtime compensation?

☐ Yes ☐ No

If yes, please explain:

8. With respect to each of Questions 1-7 above, if not previously answered or included in a prior response on this form, is any proceeding, claim, matter, suit, indictment, etc. currently pending against the firm that could result in the firm being found liable, guilty or in violation of the matters referenced in Questions 1-7 above and/or subject to debarment, suspension, removal or disqualification by the federal government, any state or local government, or any foreign governmental entity?

☐ Yes ☐ No

If yes, please explain and provide the information requested as to such similar items set forth in Questions 1-7 above.

9. Has there been any instance where the firm or any affiliate*, or its owners, officers, or managing employees submitted a bid on a public works project and were found to be nonresponsive or were found by an awarding body not to be a responsible bidder?

☐ Yes ☐ No

If yes, please explain:

10. Has there been any settled adverse claim, dispute or lawsuit between the owner of a public works project and the firm or any affiliate* during the last five years in which the claim, settlement or judgment exceeded fifty thousand dollars (\$50,000)?

☐ Yes ☐ No

If yes, please explain (and include the amount of the claim, settlement, or judgment and other relevant details):

11. In the past five years has the firm or any affiliate* had liquidated damages assessed against it during or after completion of a contract?

☐ Yes ☐ No

If yes, please explain:

12. Has a surety for the firm or any affiliate* completed a contract on the entity's behalf or paid for completion because the entity was in default or terminated by the project owner within the last five years?

☐ Yes ☐ No

If yes, please explain:

13. In the past five years, has the firm or any affiliate* had any license, credential, or registration revoked or suspended?

☐ Yes ☐ No

If yes, please provide specific details including date(s), reason(s), for revocation or suspension, whether same was reinstated, and any conditions thereto:

* The term "affiliate" has the meaning set forth in Part B, Volume 1, Section 2.7.2 of the RFQ.

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am the firm's Official Representative:

By: _____

Print Name: _____

Title: _____

Date: _____

[Please make additional copies of this form as needed for each entity required to complete this form.]

FORM D
ENTITIES PREQUALIFIED FOR SPECIFIC WORK TYPES

| Work Type | Prequalified Entity |
|--|----------------------------|
| D(a) Highway or Railroad Bridges over Water | |
| D(c) Bridge Involving Protection of Railroad Tracks | |
| 8.2 Complex Roadway Design | |
| 9.1 Level 1 Bridge Design | |
| 9.2 Level 2 Bridge Design | |
| 14.5 Bridge Load Capacity Rating & Other Bridge Analysis/Testing | |
| [Bridge] Spans Less Than 500 Feet (Including Culvert Design) | |
| Level 3 Design Elements (INDOT) OR [Bridge] Spans Greater Than 500 Feet (KYTC) | |

FORM E PROJECT INFORMATION

| Entity Involved (e.g., Proposer, Equity Member, Major Participant or Affiliate, Project Name and Contract Number) (1) | Owner Information (2) | Project Description | Dates Work Performed | Construction Value: Original Contract Price and Final Contract Price | Project Role, Description and Amount of Work Performed (3) | Project Outcome or Current Status (4) |
|--|--------------------------|---------------------|-------------------------|--|---|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |

Notes:

- (1) If the specific entity that undertook the identified project is not the Proposer, Equity Member or Major Participant, as applicable, but rather an “Affiliate” of such entity, please expressly indicate and identify the entity and its relationship to Proposer, Equity Member or Major Participant, as applicable. At IFA’s sole discretion, such entity may be required to be a Financially Responsible Party and provide a guaranty of Design-Build Contractor under the PPA.
- (2) For owner information, provide owner’s name, address, contact name and current e-mail address and phone number.

- (3) Describe the work and state the percent or dollar value of the (a) design and construction work the entity performed/was responsible for (if the entity is a design-builder); (b) the construction work performed/was responsible for (if a Design-Build Contractor); or (c) the design work performed (if the entity is a designer). For example, a member of a JV with a 30% stake in a \$200 million project would insert 30% or \$60 million; an engineer that performed \$10 million worth of work on a \$100 million project would insert 10% or \$10million.
- (4) Identify and describe any increases in the original contract amount of the greater of \$500,000 or 5% of the original contract amount and any time extensions for completion or other deadlines/milestones and the reasons for such increases and/or time extensions. If none, indicate "none".

For design firms, projects or contracts listed that were traditional design-bid-build consultant/engineering services contracts, as opposed to, for example, design-build contracts, the information provided shall be limited only to the consultant/engineer services contract, rather than any ensuing construction contract where such entity had limited or no involvement.

For construction firms, for project or contracts listed using the traditional design-bid-build delivery method, the information provided shall be limited only to the construction contract rather than any design contract where such entity had limited or no involvement.

This form must be submitted for each project identified in Part B, Volume 1, Section 2.5 and may not exceed one page per project and 8 pages in the aggregate. This separate "Notes" page shall not be counted towards the 8 pages in the aggregate.

FORM F

CURRENT CONTRACTUAL OBLIGATIONS

Entries on this sheet shall include all construction work under contract or verbal performance agreement or pending award to the contractor signing, whether as principal or as subcontractor.

(Attach additional sheets as needed for each section)

| LIST OF ALL UNEARNED WORK NOW UNDER CONTRACT WITH ANY OWNER, CONTRACTOR OR OTHER PARTY | | |
|---|-----------------------|-------------------------------|
| Contract Number | Contract Owner | Value of Unearned Work |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total of all Unearned Work Sublet | | |
| \$ _____ | | |

**LIST ALL UNEARNED WORK SUBLET AND APPROVED TO SUBCONTRACTORS ON
INDOT CONTRACTS**

| Contract Number | Subcontractor | Work Type(s) | Value of Unearned Work |
|----------------------------|----------------------|---------------------|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Total of all Unearned Work Sublet \$_____

**LIST ALL UNEARNED WORK NOW UNDER CONTRACT WITH ANY OWNER,
CONTRACTOR, OR OTHER PARTY IN THE PREQUALIFICATION WORK TYPE(S)
ASSIGNED TO THIS CONTRACT AND USED FOR BIDDING CAPACITY BY THE
PROPOSER**

| Contract Number | Contract Entered Into With | Work Type(s) | Value of Unearned Work |
|----------------------------|-----------------------------------|---------------------|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Total of Unearned Work by Work Type(s) \$_____

**LIST THE TOTAL OF ALL UNEARNED WORK SUBLET AND APPROVED TO
SUBCONTRACTORS ON INDOT CONTRACTS IN THE PREQUALIFICATION WORK
TYPE(S) ASSIGNED TO THIS CONTRACT AND USED FOR BIDDING CAPACITY BY
THE PROPOSER**

| Contract Number | Subcontractor | Work Type(s) | Value of Unearned Work |
|----------------------------|----------------------|---------------------|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Total of all Unearned Work Sublet by Work Type(s) \$_____

**LIST ALL LOW BIDS SUBMITTED, OPENED, AND PENDING AWARD WITH AN
OWNER OR OTHER PARTY**

| Contract Number | Subcontractor | Work Type(s) | Value of Unearned Work |
|----------------------------|----------------------|---------------------|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

(This Item Does Not Affect Bidding Capacity)

Total of Bids Pending Award \$ _____

I hereby certify that to the best of my knowledge and belief, the above tabulations are true and complete and that my latest financial statement on file with the Indiana Department of Transportation continues to represent fairly and substantially my financial position as of this date.

Proposer _____ (Printed OR Typed)

Signature _____

Title _____

Date _____

**EXHIBIT A
SOQ SUBMITTAL OUTLINE**

| SOQ Component | Form (if any) | RFQ Section Cross-Reference |
|---|----------------------|--|
| VOLUME 1 – <i>Submit 1 original and 5 copies of Volume 1</i> | | |
| 1. General | | |
| (a) Transmittal Letter | Form A | <u>Part B, Volume 1, General, (a)</u> |
| (b) Executive Summary (not to exceed 5 pages) | -- | <u>Part B, Volume 1, General, (b)</u> |
| (c) Confidential Contents Index | -- | <u>Part B, Volume 1, General, (c)</u> |
| 2. Proposer and Team Structure and Experience | | |
| (a) Proposer | -- | <u>Part B, Volume 1, Section 2.1</u> |
| (a) Equity Members | -- | <u>Part B, Volume 1, Section 2.2</u> |
| (c) Major Participants and Other Team Members | -- | <u>Part B, Volume 1, Section 2.3</u> |
| (d) Proposer and Team Structure | -- | <u>Part B, Volume 1, Section 2.4</u> |
| (e) Relevant Experience | Form E | <u>Part B, Volume 1, Section 2.5</u> |
| (f) Form B-1, Organizational Charts and Key Personnel Resume's | Form B-1 | <u>Part B, Volume 1, Section 2.6</u> |
| (g) Legal Information | | |
| (i) Legal Issues | -- | <u>Part B, Volume 1, Section 2.7.1</u> |

| SOQ Component | Form (if any) | RFQ Section Cross-Reference |
|--|----------------------|--|
| (ii) Legal Liabilities | -- | <u>Part B, Volume 1, Section 2.7.2</u> |
| (iii) Legal Proceedings | -- | <u>Part B, Volume 1, Section 2.7.3</u> |
| 3. Approach to Project | -- | <u>Part B, Volume 1, Section 3</u> |
| 4. Additional Materials | | |
| (a) Information Regarding Proposer, Equity Members, Major Participants and Financially Responsible Parties | Form B-2 and Form C | <u>Part B, Volume 1, Section 4.1.1</u> |
| (b) Certificate of Qualification Materials | -- | <u>Part B, Volume 1, Section 4.1.2</u> |
| (c) Entities Prequalified for Specific Work Types | Form D | <u>Part B, Volume 1, Section 4.1.3</u> |
| (d) INDOT Form CR-3 (adapted) | Form F | <u>Part B, Volume 1, Section 4.1.4</u> |
| VOLUME 2 – Submit 1 original and 5 copies of Volume 2 | | |
| 1. Financial Information | | |
| A. Financial Statements | -- | <u>Part B, Volume 2, Section A</u> |
| B. Material Changes in Financial Condition | -- | <u>Part B, Volume 2, Section B</u> |
| C. Financially Responsible Party Letter of Support | -- | <u>Part B, Volume 2, Section C</u> |
| D. Off-Balance Sheet Liabilities | -- | <u>Part B, Volume 2, Section D</u> |
| E. Surety Letter | -- | <u>Part B, Volume 2, Section E</u> |